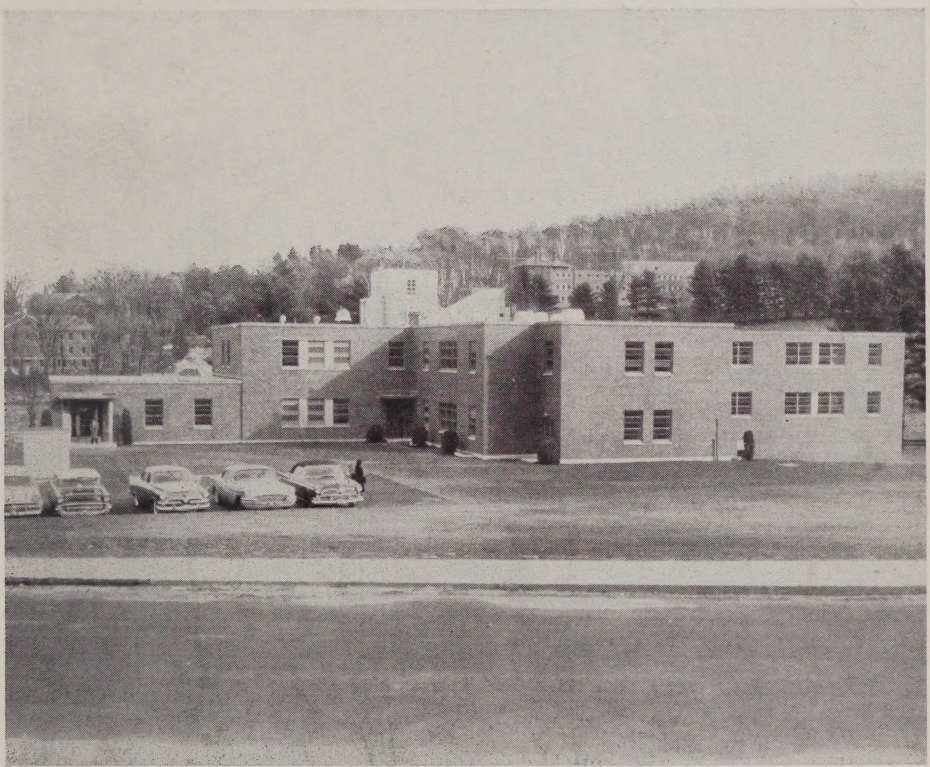
The Hampden Hippocrat

A Bulletin for the Hampden District of the Massachusetts Medical Society

VOLUME XIV OCTOBER, 1958 No. 8



MONSON STATE HOSPITAL

Simon Building

(For New Addition See Page 20.)

For September Meeting Highlight, See Page 4.

MEMBER
MEDICAL SOCIETY
MAGAZINE GROUP

Hampden District Medical Society

Founded 1840

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Allen S. Johnson, M. D. and Thomas F. Reilly, M. D.

The Hampden Hippocrat

"Life is short and art is long, the occasion fleeting, experience fallacious and judgment difficult"
Hippocrates

Published monthly except July and August

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VOLUME XIV OCTOBER, 1958 N.O 8

EDITORIALS

TV HOUSE CLEANING

Beginning January 1, 1959 phony doctors and nurses will no longer appear on television commercials. The actor, garbed in white or otherwise, will no longer be allowed to intone, "As a doctor I prescribe . . . . ". He can still say, "Three out of four doctors prescribe . . . ", but never again must he masquerade as one of them; not even if the subtitle reads, "A Dramatization".

This is good news, of course. The public has been exploited long enough by brazen impersonations and misrepresentations. What is even more gratifying is that the decision to correct this evil came as a voluntary act on the part of the National Association of Broadcasters.

However, much more house cleaning remains to be done. By itself the new code will not deter the commercial advertiser from peddling his nostrums for "'tired blood"; it will not stop him from selling pills that will "reduce you, even if you eat rich desserts", and it will not interfere with his many unfounded claims for cigarettes, cosmetics, foods and beverages.

"Why don't your medical societies do something about it?", our patients often ask. For many years, as we all know, organized medicine has been fighting against all forms of quackery and misrepresentation, but the problem is far from solved. Our existing food and drug laws are still too feeble to cope with the situation effectively. Our ultimate hope lies in the education of the public. The well-informed person is not easily deceived. Moreover, an enlightened people will demand the enforcement of newer and better legislation to safeguard the health of the public.

In the meantime the above-mentioned voluntary act on the part of the television broadcaster is most encouraging. If other immediate reforms are

to follow it cannot be done, according to the New York Times, by the broadcasters alone. "They must have help from advertisers and sponsors who are willing to display fundamental good taste and not make their spokesman on the air ridiculous." M. M.

RED FEATHER AND RED CROSS

More and more, the young, the old, the sick, the needy, and the troubled are turning beseechingly to the Red Feather for help, hope, and comfort. Current socio-economic conditions are actually creating a greater demand for community agency services. And yet, in spite of every effort to "hold-the line" in each agency's budget, there still is a sizeable amount of funds needed even to just maintain a "status quo". In Springfield alone, a goal of $1,295,203.00 has been set after two months of study and conferences on the budgets of fifty member agencies.

Who better than we, the physicians, know what the Red Feather agencies and the Red Cross are doing in our community. Each ministration of a visiting nurse is made possible primarily through the Red Feather. Each pint of blood that we reach for is most likely there only because the Red Cross played a great part in placing it there. If any of our patients need hospitalization but can't afford it, the Red Feather can and does convert this seeming impossibility into positive reality. We need reflect only briefly to arouse our enthusiasm for and to open our hearts to the Red Feather.

But what is the Red Feather? It is all of us in the community working together and giving together so that vital health, family, and youth services can be provided thereby making our "home town" a better place to live in.

The Red Feather must do a "big job", so let's "give big".

J. C.A.

WELCOME "AMA NEWS"!

The Hippocrat welcomes warmly the "AMA News" into the family of medical publications. The purpose of this first medical newspaper is to help doctors figure out the day-to-day non-clinical problems that go with the practice of medicine. Its editorial and other departments will feature " . . . . . articles of special interest to doctors in the medico-economic and socio-economic fields".

Judging by Volume I, Number I, the "AMA News" will fill a gap and will serve a number of very useful purposes. It will keep us informed on matters pertaining to legislation, business and political trends, court decisions, medico-legal affairs and the like. It will be non-technical and will report scientific progress only as news stories. It will cover even such items of interest to doctors as travel, sports, hobbies and arts. Most of all it will serve as an added medium of communication between the AMA and the doctor.

The new publication will reach our desks every two weeks. Its editors urge us to read each issue and to even take it home so that our wives can read it. Furthermore they invite comments, ideas, suggestions and anything that will help the "AMA News" to " . . . . stimulate, challenge and strenghten the moral and intellectual foundations of the democratic way of American medicine". M.M.

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1. Shalowitz, M.: Geriatrics 11:312, 1956. 2. Warter, P. J.: J. M. Soc. New Jersey 54:7, 1957. 3. Hutcheon, D. E., et al.: Paper presented at Am. Soc. Pharmacol. & Exper. Therap., Nov. 8-10, 1956, French Lick, Ind. 4. Strub, I. H.: To be published. 5. Individual Case Reports to Medical Dept., Pfizer Laboratories.

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SEPTEMBER (30) MEETING HIGHLIGHTS

Place: Hartman's Restaurant, Springfield . . . . Attendance: 215 against 280 reservations . . . . Program: Strictly business, no guest speaker . . . .

Drs. Joe Baker and Jim Smead call attention to problems of Social Security for physicians which is due to come up at the next Council meeting . . . . Membership votes in favor of it . . . .

Dr. Gene Black reports for the Blue Shield District Professional Service Committee, Dr. Beauchamp for Insurance, Labor Relations and Industrial Accidents Committee, Dr. Tillman for Health and Accidents Committee, Dr. Derby for Rehabilitation Committee . . . . All reports are accepted . . . . (These will appear in the November Hippocrat.)

President Thomas F. Reilly appoints the following nominating committee: Dr. Edward Bagg, Chairman, and Drs. Eugene Beauchamp and O. J. Menard . . . . The next meeting will be on December 2, place to be announced . . . .

Amendments to Chapter V, Section 2(b) and Chapter VI, Section 9, as published in the September Hippocrat, are adopted unanimously . . . .

Before adjourning at 9:45, membership votes in favor of business meeting as opposed to combined speaker-and-business type of meetings . . . .

CHILD PSYCHOLOGY

If a doctor is doctoring another doctor, does the doctor doctoring the doctor, doctor the way he wants to doctor him, or does the doctor being doctored tell the doctor doctoring him how he wants to be doctored? Patty-Jo Leary
Age 10
(Bus. Mgr's. Daughter)

SEPTEMBER EXECUTIVE COMMITTEE MEETING

Below is a summary of the Sept. 11th District Executive Committee Meeting.

1. It was voted to give District Society approval to the American Cancer Society's film, " Time and Two Women".
2. The Board of Editors of The Hampden Hippocrat was authorized to approach Berkshire and Hampshire County Districts on participating in the publication of the Hampden Hippocrat. At the discretion of the Board, Franklin District may also be invited to participate at some future date.

The Grievance Committee aired complaints involving three physicians and the physicians were absolved of the charges in each case.

Harry N. Memery, M.D.

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President's Page

TO THE LADIES

It is sincerely hoped that everybody has read the splendid article by Mrs. Elmer F. Franseen, President of our Auxiliary. Appearing in last month's issue of the Hippocrat, it describes clearly and succinctly the history, purposes and achievements of the Woman's Auxiliary to our District Society.

Having witnessed at close range the fine work of this organization during the last few years I can safely state that the article is free of pretense and exaggeration. If anything it is characterized by modesty and understatement. I have always found the Auxiliary loyal, co-operative and ready to serve in whatever capacity it is called upon to do so. Only recently when the Jenkins-Keough Bill was due to come up in Senate a telephone call to the Auxiliary brought immediate action on the part of its membership. Many letters and telegrams went out to our Senators in Washington urging them to support this bill. This, however, is but a small sample of the Auxiliary's many accomplishments and achievements. Little wonder that it ranks so high in the family of state and national Auxiliaries!

I am convinced that in the past we have not accorded our Auxiliary due credit and recognition. We have taken it, I am afraid, too much for granted. But it isn't too late to mend it. In the future let us assist our fair ladies in their programs, participate in them if necessary, and let us contribute significantly from our treasury to their scholarship fund, or to any worthwhile fund-raising project that they may undertake. Other Societies have done it, and it is the least that we, of our own District Society, can do to show our interest, approval and recognition. Before long we will be invited to attend the White Cap Banquet which is to take place on November 1, 1958. Let us turn out in such large numbers as to convince the Auxiliary of our appreciation of the fine work it has done and is doing in behalf of medicine and the health of the public.

Thomas F. Reilly, M. D.

OFFICERS OF M.M.S. 1958-59

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WESTFIELD ITEMS

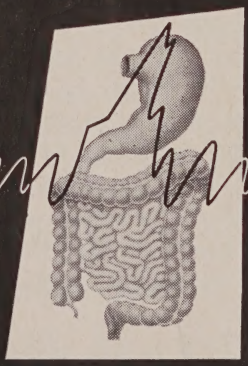
New arrival.—B. I. Wantman, M.D. Dr. Wantman comes to the Noble Hospital as an additional staff anaesthetist from the Pittsfield General Hospital, where he served in a similar capacity. He plans to reside at 46 Broad Street, Westfield.

Another victim of the expensive and exacting requirements of present-day hospital management is noted as the hospital functions of the Holy Child Guild are abandoned. In the future the facilities of the Providence Hospital, Holyoke, will be available.

Unanticipated delay in delivery of items essential to construction has slowed progress at the new Noble Hospital to an unpleasant and dreary pace. Originally planned for October first the dedication is now vaguely set for the end of that month with actual transfer of patients occuring somewhat later.

Robert M. Marr, M.D. died May 3, 1958 at Orlando, Florida. Born at Westerly, R. I. and a graduate of the Tufts Medical School he interned at the Mercy Hospital and arrived in Westfield in 1912, first as general practitioner, and later as anaesthetist to the Noble Hospital. As chairman of the Board of Health for 32 years he was responsible for the inauguration of most of the present-day safeguards to the health of the community. He served as medical officer in World War I. Harold Holleran, M.D.

in spasticity of the GI tract



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(1) Marangoni, B. A.: Am. Pract. & Digest Treat. 8:1959, 1957.
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AUXILIARY DOINGS

Plans are taking shape for a special meeting, sponsored by the Woman's Auxiliary through its Legislative Committee and assisted by the Legislative Councilor of the District Medical Society. It will deal with the water pollution control program for the Connecticut River.

The meeting is scheduled for October 15 at 8 p. m. in the Nurses Auditorium of the Springfield Hospital. The speaker: Worthen H. Taylor, Acting Chief Sanitary Engineer for the Department of Public Health of the Commonwealth. His subject: *"What's in the River?"* The public is invited to attend, and invitations have been extended to the various Sportsmen's Clubs in the Connecticut Valley.

With interest in the recreational possibilities of the Connecticut River on the increase, the Legislative Committee of the Auxiliary considers the condition of the river a matter of great importance to public health. Through the meeting the Auxiliary hopes to focus attention on Public Law 660, the Federal Water Pollution Act. On September 25th, through the courtesy of the Bassett Boat Co., the Committee made a tour of the river and its tributaries, as a promotional activity for the meeting in October.

* * *

During the summer, the Woman's Auxiliary, alerted by its National office and by President Reilly of the District Society, gave attention to another matter of legislative importance when the Jenkins-Keough Bill for self-employed was due to come up in the Senate. Wires and letters were sent to both Senator Kennedy and Senator Saltonstall, requesting support of the legislation. The Auxiliary stands ready to reinforce the request when the Senate re-convenes next year.

Members of the Legislative Committee of the Woman's Auxiliary are: Mrs. J. W. S. Hartshorn, Jr., Chairman, Mrs. William Devlin, Mrs. Charles A. Diamond, Mrs. Emil W. Dillenback, Mrs. Field C. Leonard, and Mrs. George Sumner.

* * * *

Let's not forget the "White Cap Banquet" which is going to be held on November 1, 1958, at the Colony Club in Springfield.

This annual affair is sponsored by the Woman's Auxiliary to the Society with the proceeds going to subsidize a program of recruitment for careers allied to medicine and for the granting of nursing scholarships to the young people in the Hampden District.

Many scholarships have already been given, many more are still needed.

If you can't attend, send a donation to this worthwhile endeavor anyway.

* * * *

The Auxiliary opened its season with a meeting and tea at the new Providence Hospital Tuesday, September 30. Guest speakers were Robert

(Continued on page 24)

HOSPITAL STAPHYLOCOCCAL INFECTIONS

Of late the importance of staphylococcal infections has been recognized with increasing frequency in many hospitals. Certain types of staphylococcal disease are serious problems for our hospitals, namely, cutaneous and pulmonary infections in newborn infants and post-partum mothers; wound infections, broncho pneumonia, and enterocolitis in post-operative patients; bacteremia, septicemia, endocarditis, and pyelonephritis in both medical and surgical patients.

With the advent of modern chemotherapy and antibiotics, changes have occurred in some aspects of hospital life. Such microorganisms as streptococci, pneunococci, and meningococci, which formerly caused major infectious disease problems in hospitals, have yielded largely to the antibotics. The major enteric diseases, such as typhoid fever and bacillary dysentery, have practically succumbed to community sanitation. Staphylococci, ubiquitously prevalent in hospitals during the pre-antibiotic era, still continue as important causes of morbidity and mortality.

The Staphylococcus possesses an unusual capacity to become resistant to almost all the antibotics used currently. Acquisition of resistance is most striking in the hospitals where the greatest exposure of staphylococci to antibiotics occurs; therefore, hospitals have become reservoirs of antibiotic resistant staphylococci.

The more frequent and heavier a person's exposure to a given organism, the greater the likelihood of his becoming colonized by that organism. Clinical disease does not always follow acquisition of antibiotic-resistant staphylococcus; nor does acquisition of antibiotic resistance necessarily imply increase in virulence. However, many such medical procedures as steroid therapy, ionizing radiation, frequent veni punctures, in-dwelling catheters, and nitrogen mustard therapy carry with them not only a greater risk of infection but also clinical disease. One can easily visualize the development of a vicious circle wherein the many susceptibles in our hospitals are exposed to large populations of pathogenic antibiotic-resistant bacteria. This would naturally tend to the development of more frequent staphylococcal infections and consequently to greater and more frequent exposure of other susceptibles. It is no wonder that staphylococcal infections in hospitals can and have become a major health problem.

Although there are many gaps in our knowledge concerning the biology, ecology, and epidemiology of the staphylococcus; much can be accomplished by further experimental and epidemiological study, by alteration of the hospital environment, by more judicious use of antibiotics; by re-affirmation and stress of common-sense principles of aseptic techniques, and by proper segregation of human reservoirs, namely, hospital patients and personnel. Such a program requires the intelligent cooperation of all hospital personnel. To initiate such a program, the establishment of a vigorous Committee on Infections in each hospital is imperative. The mission of such a committee would be to secure information necessary for action, to initiate action, and to see that action completed.

John C. Ayres, M. D., M. P. H.
Commissioner of Public Health
Springfield

THE CANADA HOSPITAL ACT

The Canada Hospital Act (House of Commons Bill 320) will become effective as soon as the Governor-general of our neighboring country decides to activate it.

This Bill entitles Canadians to free hospitalization in the public wards of any hospital in Canada. They will still have to pay for semi-private or private accommodations.

Socialistic as the Bill may seem, it has apparently received the blessings of the Canadian physicians. This, however, is nothing new. Two Canadian provinces, British Columbia and Saskatchewan, have had a 'free hospital act' in operation for several years, and the physicians seem to be well satisfied with it. Newfoundland has had not only free hospitalization but also free medical care for all children under sixteen years of age. With this the medical profession is not in full accord as it limits medical fees to 80% of normal (Blue Shield) for the first month, and 40% for the second month. There are no fees at all for cases of longer duration. However, the physicians had practically nothing to say about this piece of legislation as it was introduced by parliamentary ukase.

The attitude of the Canadian physician toward socialized medicine differs consdierably from our own, perhaps because of the English influence. Furthermore, the entire country is served by approximately ten thousand physicians, about four thousand of which are concentrated in the industrial province of Ontario. This leaves a mere 6,000 doctors to take care of a country much larger than the United States with its more than two hundred and twenty thousand physicians. Because of this the Canadian physician is usually a general practitioner working in a small cottage hospital, and covering a very large area or territory.

As to payment to hospitals under the new Act, it will vary in the different provinces, but no final agreement has yet been reached with the federal government. In some provinces it may be financed by sales tax; in others by a tax on meals. Each province must find its own method of fund raising. Hospitals are paid a lump sum twice each month, based on their actual fixed expenditures, including about seventy percent of their per diem costs. Each quarter they will be audited and will receive payments adjusted to the per diem cost of the previous year. Their expense will be scrutinized by a hospital commission in each province to make sure that costs are not wasted on frills and non-essentials. Each physician will collect his usual fee for hospital services. A ruling committee consisting of physicians will be set up in each hospital to determine whether the patient in each instance really required hospital care or could be treated as well at home.

The average Canadian family's income is relatively low, probably in the $2000 - 3000 range. In Newfoundland it is about $800 per year. Hospital costs have risen in Canada at about the same rate as in the United States. Canada, outside of Ontario, has very little industry large enough to help finance the cost of sickness. Some way apparently had to be found to fill a gap and to solve a problem with which we ourselves may soon be confronted. It is because of this that the Canadian experiment warrants our closest observation and scrutiny.

Ralph T. Miller, M.D.

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*Finnerty, F. A. Jr.: New York State J. Med. 57:2957 (Sept. 15) 1957.

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October 3 — December 12, 1958
Holyoke Soldiers' Home, Holyoke
Cooley Dickinson Hospital, Northampton

PROGRAM

Sessions 1—4, Holyoke Soldiers' Home

1. **October 3, 1958**
   USE OF ANTIBIOTICS IN THE HOSPITAL
   Richard Meade, III, M.D.
   Louis Weinstein, M.D.
2. **October 10, 1958**
   DIVERTICULOSIS & DIVERTICULITIS; ULCERATIVE COLITIS & OTHER DISEASES OF THE COLON
   Franz J. Ingelfinger, M.D.
   Richard Warren, M.D.
3. **October 17, 1958**
   OBESITY & NUTRITIONAL PROBLEMS
   Jean Mayer, M.D.
   Oscar Portman, M.D.
4. **October 24, 1958**
   CARDIAC ARRYTHMIAS & RECENT ADVANCES IN THE TREATMENT OF HEART FAILURE & HYPERTENSION
   David Littman, M.D.
   Edwin O. Wheeler, M.D.
5. **October 31, 1958**
   RECENT ADVANCES IN ALLERGY
   Ethan Allan Brown, M.D.
   Robert P. McCombs, M.D.

Sessions 6-10, Cooley Dickinson Hospital

6. **November 7, 1958**
   RECENT ADVANCES IN PHARMACOLOGY (NEW SPECIFIC DRUGS); MANAGEMENT OF ACUTE POISONINGS
   Dale G. Friend, M.D.
   Eugene D. Robin, M.D.
7. **November 14, 1958**
   SKIN MANIFESTATIONS OF SYSTEMIC DISEASE, COMMON DERMATOLOGIC PROBLEMS
   Bernard Appel, M.D.
   Robert F. Tilley, M.D.
8. **November 21, 1958**
   PROBLEMS IN GERIATRICS
   Simon Horenstein, M.D.
   Wesley G. Woll, Jr., M.D.

November 28 — No Session

9. **December 5, 1958**
   EARLY DIAGNOSIS OF MALIGNANCY
   Thomas J. Anglem, M.D.
   Henry M. Lemon, M.D.
10. **December 12, 1958**
    SPLENOMEGALY & HYPERSPLENISM
    John P. Mahoney, M.D.
    Mario Stefanini, M.D.

Your Area Chairmen, Dr. H. Paul Wakefield and Dr. James H. Averill and their committee, have assisted in the planning of this course in cooperation with the Postgraduate Medical Institute's Curriculum Committee, Dr. W. Richard Ohler Chairman.

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PROVIDENCE HOSPITAL SEMINAR

The fourth semi-annual seminar at the Providence Hospital will be held on October 29, 1958. The subject is "Electrolyte and Fluid Balance" to be discussed by Dr. Aronld S. Relman of the Boston University School of Medicine and Dr. William Schwartz of the Tufts University School of Medicine.

The program will run from 1 P.M. to 10 P.M. The charge of $10.00 will include total cost of the evening meal.

Any profits realized will be donated to the Providence Hospital Building Fund.

Checks may be sent to Richard J. Maher, M.D., 197 Chestnut Street, Holyoke, Massachusetts.

PROGRAM

1:00 - 1:30 P.M.	Sodium metabolism and clinical problem of sodium-depletion.
1:30 - 2:00 P.M.	The problem of the low serum sodium.
2:00 - 2:15 P.M.	Questions and discussion.
2:15 - 2:45 P.M.	Potassium metabolism, potassium-depletion and intoxication.
2:45 - 3:15 P.M.	Potassium-depletion, the kidney and aldosteronism.
3:15 - 3:30 P.M.	Questions and discussion.
3:30 - 3:45 P.M.	Intermission.
3:45 - 4:15 P.M.	Calcium and phosphorus metabolism.
4:15 - 4:30 P.M.	Questions and discussion.
4:30 - 5:15 P.M.	Introduction to acid-base disorders.
5:15 - 5:30 P.M.	Questions and discussion.
7:30 - 8:00 P.M.	Diagnosis and management of edema.
8:00 - 8:10 P.M.	Questions and discussion.
8:10 - 8:40 P.M.	Fluid and electrolyte problems in chronic renal disease.
8:40 - 8:50 P.M.	Questions and discussion.
8:50 - 9:20 P.M.	Fluid and electrolyte problems in acute renal failure.
9:20 - 9:30 P.M.	Questions and discussion.

ACADEMY

October Meeting.

The speaker at the October 14th meeting of the Springfield Academy of Medicine will be Kurt J. Isselbacher, M.D., Chief, Gastroenterology Unit, Massachusetts General Hospital. The topic will be "Jaundice".

At 5 P. M. of the same day he will conduct a Clinical Conference on "Liver Disease" at Mercy Hospital.

November Meeting.

The speaker at the November 11th meeting of the Springfield Academy of Medicine will be Arnold P. Friedman, M.D., Columbia University College of Physicians & Surgeons, and Physician-in-Charge, Headache Unit, Montefiore Hospital, N. Y. His topic will be "Mechanism and Treatment of Migraine Headache".

The Clinic that day will be conducted by Arnold P. Friedman, M.D., at the Springfield Hospital.

MEDICAL READER

Happy Dr. Lee

In 'The Happy Life of a Doctor', an autobiography by Dr. Roger I. Lee, we found an interesting and revealing story of a busy life simply and directly written. And having grown up medically with the author at the M. G. H. and later in organized medicine, we can verify many of his statements. He and Paul D. White of the West Medical service at the M. G. H. used to engage in friendly and stimulating rivalry with us wise men of the East.

Peculiarly pertinent for us are his observations on the Man of Cos, Father Hippocrates, who himself was a practicing physician and no political dealer in generalities or a blind follower of ritual, whether medical or religious. The Hippocratic code, in the words of Dean Willard L. Sperry of the Harvard Divinity School, as quoted by the author, "As far as I know . . . has no parallel in the history of morals". And after 2000 years, as he points out, the inspiration of the Code continues to activate the lives of many physicians of the 20th. century.

The inside story of war-time medicine as well as many exceptional figures also are revealed. See for yourselves. (Little, Brown and Company, Boston and Toronto, pp. 278, 1956). E.P.B.

Happy Though Married

Recently we were asked to pass on the suitability of a handbook on marriage for circulation in a public library. Dr. Theodor Bovet of Switzerland, the noted European marriage counselor, offers in 'Love, Skill and Mystery' (Doubleday & Co., Inc., Garden City, N. Y., 1958, $3.50), a candid, thought-provoking and thorough consideration of the factors that are essential for marital success and happiness. Physicians will do well to review Dr. Bovet's discussion of the physical, amorous and religious aspects of married life, a discussion often missing in such treatises. They will then be better able to advise parents, past, present and future. Not a few of them might even learn to understand better their own overworked wives. Where upon we released the book, and took our wife to the Sweetheart Teahouse for chicken and waffle.

E.P.B.

FOUR-HOSPITAL GOLF TOURNAMENT

A 4-way hospital tournament, including the Mercy, Springfield, Wesson Maternity and Wesson Memorial was held at the Longmeadow Country Club, Sept. 10, 1958. The winners were as follows:

Team Best Ball: Barnes, Bloniarz, Popkin, and Rini, 67.

Low Gross: Uhl 75, Sady 78, Rock 79, and Krause 80.

Low Net: Kresock 72, Sanella 72, Dale 72, and Gramse 73.

Low Total Score For Short Holes:— Rock 12.

Longest Drive on #10:—Emery.

Suggested shingle for Dermatologist and Orthopod's joint office.

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IN MEMORIAM

IRVING ROMEO CALKINS, M. D.

1875 - 1958

Dr. I. R. Calkins died on August 26, 1958, in a rest home.

Dr. Calkins was born in Three Rivers, Mass., and obtained his M.D. degree from Baltimore Medical College. He interned at Baltimore Hospital and took some of his post-graduate training at the University of Vermont, University of Pennsylvania, New York Post-Graduate College and he also studied in England, Paris, Scotland, France, Italy and Germany.

From 1917 to 1920 he owned and operated Hampden Hospital, in Springfield, Mass., in the building now occupied by the Oaks Inn on State Street. He was an expert marksman and magician.

He was a member of the Hampden District Medical Society, The American Medical Association and was past president of the New York and New England Railway Surgeons.

He practiced medicine in Springfield for 57 years, but has been inactive during the past thirteen years because of ill health.

To the surviving members of his family and to his many friends and associates the deepest sympathy is extended.

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FLU VACCINE — TO GIVE OR NOT

The general opinion in public health circles is that the virus responsible for last year's Asian influenza pandemic will make an "attenuated comeback" during the coming cold season. Moreover, this Asain strain virus should be the predominating type in influenza outbreaks for the next few years. However, the outbreaks are expected to be "milder" in terms of the number of individuals involved because of the basic community immunity derived from the 1957 experience.

Public health authorities are not making any urgent recommendations for widespread immunization with influenza vaccine at this time. It is, rather, being left to practicing physicians to judge whether or not influenza vaccine should or should not be administered. Certain individuals exposed to special health risks should be considered as good candidates, namely, expectant mothers and persons suffering from cardiovascular or pulmonary diseases or from metabolic disorders. Insofar as large groups are concerned, such as in industry, vaccination might be considered where large absenteeism would disrupt seriously work or production schedules. Although influenza undoubtedly will be prevalent to a greater or lesser degree the coming season, the causative strain or strains predominating cannot be predicted. Therefore, the use of a polyvalent influenza vaccine, including the Asian type, is recommended.

John C. Ayres, M. D.
Commissioner of Public Health
Springfield

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HOSPITAL CONSTRUCTION

VI — Monson State Hospital

The Monson State Hospital was founded in 1898, as the Massachusetts Hospital School for Epileptics. It was probably the first hospital in the country serving exclusively patients afflicted with seizures.

The institution has since then grown to town size with 1600 patients and 750 employees. It represents the largest medical institution in Hampden County. It is situated on a 900 acre tract between the Monson Hills and the Quaboag River and is one-half mile from Palmer. The doctors on the staff belong to the Hampden District Medical Society.

For years the hospital has been overcrowded and only recently has the building program begun to catch up. The latest structure is the Beatrice V. Buckley building as seen in the above photograph. This houses one hundred fifty females. It is modern and attractive in all respects. It is named after Mrs. Beatrice Buckley of Ware, Massachusetts, a trustee, and was dedicated during the past summer.

Monson is the only Epileptic Hospital in New England, and one of fifteen in the entire country. Patients are of all age groups, from two weeks to age ninety. Many of them spend their entire life in this hospital and many have been inmates for as long as fifty years. A recent survey showed that eighty percent of the patients could be classified as cerebral

palsy, due to brain damage at birth or early in life. Of course, all have epilepsy.

Occupational therapy is one of the chief activities of the hospital in an endeavor to rehabilitate as many patients as possible. Of necessity, much of this is limited to manual activities. Even the bedridden are taught, as much as possible, to care for themselves, and many are taught to care for other fellow patients. This has reduced the bedridden population considerably and adds an atmosphere of hope. The locked building has almost disappeared and the wards are surprisingly bright and cheerful.

Doctor R. G. Osterheld, the superintendent, and his staff are very proud of their hospital, and are very happy to show it to medical visitors. Members of our Society could profit much by paying them a visit.

Ralph T. Miller, M.D.

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Alonzo D. Sheffield. Jr., M.D.

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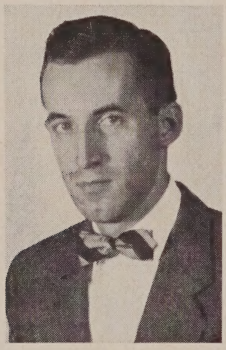
133 St. James Avenue, Springfield, Mass.
Born: November 20, 1921
Medical School: Howard University — 1951
Internship:
District of Columbia—General Hospital
Washington, D. C.
Residency:
University of Colorado—Medical Center
Denver, Colorado
General Practice



W. Warren Walthall, Jr., M.D.

Office:
130 Maple Street, Springfield, Mass.
Born:
June 15, 1923 — Richmond, Virginia
Medical School:
Medical College of Virginia — 1949
Richmond, Virginia
Internship:
St. Francis Hospital — 1949 - 1950
Hartford, Connecticut
Residencies:
St. Francis Hospital — 1950 - 1951
Hartford, Connecticut—Medicine
Lenox Hill Hospital — 1953 - 1955
New York, N. Y.—Radiology
Memorial Hospital — 1955 - 1956
New York, N. Y.—Radiology
Specialty: Radiology

HOSPITAL DOINGS

Schedule of Meetings for October

Mercy Hospital

Surgical Conference, Monday 8-9 A.M., October 6, 20, and 27.

Medical Conference, Tuesday 8-9 A.M., October 7, 21, and 28.

Orthopedic Conference, Wednesday 8-9 A.M., October 8, 22, and 29.

Obstetrical Conference, Thursday 9-10 A.M., October 2, 9, 16, and 20.

Pediatric Conference, Friday 9-10 A.M., October 3, 10, and 17.

E.E.N.T. Conference, Fourth Friday 8-9 A.M., October 24, 1958.

Surgical Department Meeting, Third Saturday, 8:30 A.M., October 18, 1958.

G. U. Conference. Second Tuesday, 4:30 P.M., October 14, 1958.

Academy Clinical Conference, Second Tuesday, 5:00 P.M., October 14, 1958.

Clinical Staff Conference, Fourth Thursday, 8:30 P.M., October 23, 1958.

Springfield Hospital

Clinicopathologic Conference — Wednesday, October 22, 12:00 noon, Auditorium.

Basic Science Correlations in Disease States—Wednesdays, October 22, 29, 1:30 -3:00 p.m., Auditorium. (Open to all physicians in this area by registration with the Postgraduate Medical Institute, Boston.)

Medical Grand Rounds—Wednesdays. October 1, 8, 15, 22, and 29, 8:30 - 9:30 a.m. Auditorium.

(Review of Medical Residency Program, October 1.)

(Medical Death Review, October 22.)

Medical Journal Club and Audio-Digest Tape Conferences—Alternate Fridays October 3, 17, and 31. October 10 and 24,

12:00 noon - 1:00 p.m. Large Special Dining Room.

Neuropsychiatry Conference—Wednesday, October 8 - 8:00 p.m.

Pediatric Grand Rounds Wednesdays, October 1, 8, 15, 22, and 29, 9:00 - 10:00 a.m. Wright IV Conference Room.

Surgical Grand Rounds, Saturdays, October 4, 11, 18, and 25, 10:00 a.m., Auditorium. (October 25, Surgical Death Review.)

Obstetrics and Gynecology Grand Rounds and Conferences, Thursdays, October 2, 9, 16, 23, and 30, 12:00 noon - 1:00 p.m., Wesson Maternity Conference Room.

Orthopedic Grand Rounds, Wednesday, October 1 (monthly) 1:00 - 2:00 p.m. Auditorium.

General Pathology Conference, 1st and 3rd Mondays, October 6 and 20, 4:00 - 5:00 p.m., Auditorium.

Wesson Memorial Hospital

Every Monday—12 noon, Medical Service Grand Rounds.

Every Saturday—11 a.m., Surgical Service Grand Rounds.

Friday, Oct. 3, 11 a.m., Orthopedic Service Meeting.

Thursday, Oct. 16, Clinical Pathological Conference, 8:30 p.m.

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The Annual Mercy Hospital Golf Tournament was held at the Springfield Country Club on Wednesday, October 8, 1958.

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Thiamine Mononitrate (B_1)	3 mg.
Riboflavin (B_2)	3 mg.
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Vitamin B_{12} (cobalamin concentrate)	3 mcg.
Niacinamide	25 mg.
d, Calcium Pantothenate	5 mg.
Folic Acid	0.5 mg.
Menadione (K)	1 mg.
Vitamin E (dl, alpha tocopheryl acetate)	1 Int. Unit
Magnesium	3 mg.
Manganese	1 mg.
Copper	1 mg.
Zinc	1 mg.
Molybdenum	0.2 mg.
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AUXILIARY

(Continued from page 8)

Illingworth, professor at Clark University, and Mrs. Illingworth. Their hour of book and play reviews was well received.

Special guests at the meeting were three of the girls who have received scholarship aid from the Auxiliary for training in the nursing program at the Providence Hospital. They were Elaine Sudyka, of Chicopee, Helen Ruel of Holyoke and Carol Fessia of this city.

Mrs. Edwin Gillis of Westfield, chairman of membership, introduced twenty new members to the Auxiliary.

Mrs. E. F. Franseen, President
Woman's Auxiliary

N. E. POSTGRADUATE ASSEMBLY

The 16th Annual New England Postgraduate Assembly, a three-day program of postgraduate medical courses for practicing physicians, will be held at the Statler Hilton in Boston, Mass., November 4, 5 and 6, under the auspices of the six New England state medical societies and chapters of the American Academy of General Practice.

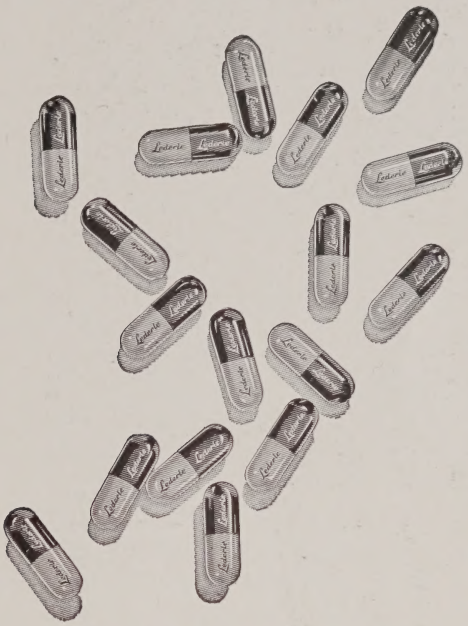
Dr. Kenneth W. Warren, representing the Massachusetts Medical Society is chairman.

In addition to morning clinics at Boston hospitals, the program will include lectures, panel discussions, clinicopathological conferences, luncheon symposia, medical films and scientific and technical exhibits.

A special program for wives of attending physicians has been arranged.

* * *

The Interstate 43rd International Medical Assembly will take place at Cleveland, Nov. 10—13, 1958. For information write to P. O. Box 1109, Madison 1, Wis.



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